

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO 10782340

FILED DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
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42						
43						
44						
45						
46		1				
47		1				
48		1				
49		1				
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	IND	DEP	IND	DEP	IND	DEP
51		1				
52						
53		2				
54		2				
55						
56	1					
57	1					
58						
59						
60						
61						
62						
63						
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96						
97						
98						
99						
100						
TOTAL IND.	4					
TOTAL DEP.		36				
TOTAL CLAIMS	40					